Wichita

RIVER FESTIVAL LICENSE APPLICATION

Fee: Waived Complete in Duplicate

CITY LICENSE (316) 268-4553

Applicant Information	
Name	Phone
Address	Zip Code
Business Information	
Name	Phone
Address	Zip Code
The Wichita River Festival will begin	and end
amount of \$ which shall	ed to the City Clerk of the City of Wichita insurance in the continue in effect at all times during which the Wichita
River Festival is being held, and naming the City insureds.	of Wichita and the Board of Park Commissioners as co-
·	Festivals, Inc., to make application for a Cityof Wichita Inc., will abide by <u>all</u> rules and regulations as set out and of the Code of the City of Wichita, Kansas.
Signature of Applicant	-
Subscribed and sworn to before me this	_ day of
My appointment expires on day of	· · · · · ·
	Notary Public

FOR OFFICIAL USE ONLY

See attached for regulatory approvals/disapprovals

	APPROVED	DISAPPROVED	DATE
Law Dept (Insurance)			
City Manager			
License Number		Clerk	
Date Received		Date Released	